

CLAIMS ONLY

Application Number

10/749,552

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED 5/18/97		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep.	Depend	Indep	Depend	Indep	Depend	*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	1						51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9	1						59						
10							60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20	1						70						
21							71						
22							72						
23							73						
24							74						
25							75						
26	1						76						
27							77						
28							78						
29							79						
30	1						80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37	1						87						
38							88						
39							89						
40							90						
41							91						
42	1						92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total							Total						
Indep.	7						Indep.						
Total							Total						
Depend.	36						Depend.						
Total							Total						
Claims	43						Claims						